

(Office	Use Only)
Form Name: FMP11F	Receipt:
Form Date: 2/9/2015	Entered By:

## **Fire and Life Safety Inspection Application** (Foster and Foster Group Homes)

Please mail or deliver this completed application form and payment. Payment must be exact cash, Money Order, or Cashier's Check. No personal or company checks accepted. Make fees payable to Harris County Fire Marshal's Office. No refunds will be permitted once the application has been received. If you have not been inspected by our office within the last year, please call 281-436-8030.

Foster Home Information Foster Parent Name*:	Key Map:		
Physical Address*:			
Mailing Address:	City:	State:	Zip:
Contact Person*:Ph	none*: Email:		
Licensing Agency Information			
Licensing Agency*:	Representative*:		
Licensing Phone*: Lic	ensing Email (or Fax)*:		
Application Instructions	Fee Schedule		
Your application packet should include:	Foster Home (1 – 6 child	ren)	\$50
<ul><li>This application, filled out entirely</li><li>The appropriate fee and payment</li></ul>	Foster Group Home (7 –	12 children)	\$125
type			
Walk-ins accepted in both locations: Harris County Fire Marshal's Office 7701 Wilshire Place Houston, TX 77040			
Tiouston, TX 77040			
Harris County Fire Marshal's Office			
,			

If you submit or alter any of this application or HCFMO document with false information, you may be charged with tampering with a government document, under Texas Penal Code 37.10 TAMPERING WITH GOVERNMENTAL RECORD.